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ABSTRACT

The first of eight delegate workbooks prepared for the May, 1977 White House Conference on Handicapped Individuals contains the ballots for the workshop on health and social concern related to diagnosis, prevention and psychological adjustment. The ballots are intended to enable delegates to assign priorities to various issues and proposals in a way that reflects conclusions of state and territorial conferences. The following issues are among those considered: early identification of handicapping conditions, availability of diagnostic teams, provision of effective treatment services, public education, allocation of resources for preventive programs, encouragement of genetic counseling and the support services necessary to effect the transition of handicapped persons from institutions to the community. For each such topic, multiple approaches, to which the delegate must assign priorities, are listed. For example, the means suggested to insure early identification of handicapping conditions include such measures as improving professional training, organizing early screening programs, establishing an information clearinghouse, and educating high school students about handicapping conditions. (GW)

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THE WHITE HOUSE CONFERENCE ON HANDICAPPED INDIVIDUALS

DELEGATE WORKBOOK

WORKSHOP I
HEALTH AND SOCIAL CONCERNS (1)

DIAGNOSIS
PREVENTION
PSYCHOLOGICAL ADJUSTMENT

WASHINGTON, D.C., MAY 23-27, 1977

EC101186

LEGISLATIVE HISTORY

The White House Conference on Handicapped Individuals was authorized by Public Law 93-516, the Vocational Rehabilitation Act of 1973, as amended in 1974. Title III of the Act declared, "It is of critical importance to this Nation that equality of opportunity, equal access to all aspects of society and equal rights guaranteed by the Constitution of the United States be provided to all individuals with handicaps."

The measure was passed and approved by both House and Senate in November, 1974 and signed into Law by President Ford in December, 1974. Title III, sections 300-306, P.L. 93-516, is called the "White House Conference on Handicapped Individuals Act."

MISSION STATEMENT

The mission of the White House Conference on Handicapped Individuals is comprised of three goals:

- to provide a national assessment of problems and potentials of individuals with mental or physical handicaps;
- to generate a national awareness of these problems and potentials; and
- to make recommendations to the President and Congress which, if implemented, will enable individuals with handicaps to live their lives independently, with dignity and with full participation in community life to the greatest degree possible.

THE PROCESS

Officially the White House Conference commences on Monday evening, May 23rd. Whether you are an official (voting) delegate or an observer, it is important that you pre-register. By doing so, you will expedite your own check-in and room assignment at the Sheraton-Park and receipt of your official participant documentation. Registration and securing of registration materials will extend from 8:30 a.m. to 7:00 p.m. on the 23rd. The first evening's event is scheduled for 7:30 to 9:00 p.m., and will feature greetings from President Carter. Immediately after the opening ceremony, there will be a cabaret featuring disabled professional entertainers and lasting from 9:00 to 11:30 p.m.

Tuesday, May 24th, the Conference business begins with workshops that will consider issues and alternative recommendations. The morning and afternoon discussion sessions will be divided according to Concern and topic designation, following the format listed in this workbook. All delegates will be assigned to specific sessions to insure full discussion of all topics and maximum utilization of available space. That evening, each State delegation will hold a caucus to discuss and cast votes on issues and recommendations.

Each State has assigned delegates to every session of the Conference. They report to their respective delegations the subjects, points of discussion, favored recommendations and State positions on the issues. Additional sessions will be conducted Wednesday morning and afternoon and Thursday morning, and are followed by State caucuses Wednesday evening and Thursday afternoon.

Thursday afternoon features a closing session to present recommendations and their implications. On Friday morning a full report will be available on the recommendations under each of the Conference's 25 Topical areas for everyone attending the White House Conference.

The major task then of delegates at the White House Conference will be to discuss the merits and implications of specific issues and recommendations as identified through State and Territorial Conferences and seminars and prioritize the recommendations that best combine to solve each issue. Voting by delegates will be computerized so that complete results will be available on the final day of the National Conference.

The Conference also will offer the opportunity for minority reports or general expressions to be presented Tuesday and Wednesday evenings at open forums. Verbal comments must be limited to three minutes. Written documentation must not be longer than three single-spaced pages. Participants will be taken in the order of registration. A registration booth will be open from 8:00 a.m. to 5:00 p.m. Tuesday and Wednesday in the hotel lobby.

Observers at the Conference are asked to abide by certain ground rules. Only official delegates are eligible to discuss issues and vote on recommendations. While observers may not discuss the issues at the various sessions, they are welcome to discuss topics with delegates during meal breaks and when official sessions are not being conducted. Observers will be surveyed on a variety of matters at the end of the Conference.

The closing session of the Conference will take place Thursday afternoon. It will include a Congressional reception to which everyone is invited. This will be your chance to meet the members of Congress and Federal officials on a personal basis. And, despite the possible fatigue resulting from several days of intense activity, it will be a time for reflecting on the meaning of this most significant event and preparing for the work of implementation that must follow.

Delegate and Participant Statements From State White House Conferences

"This is the first big opportunity for handicapped individuals to give testimony on problems that directly affect their lives, and many have solutions which our legislators need to be aware of. Now we can address ourselves to the basic problems and start solving them through a united effort, with all the government agencies working, together with consumers, toward the same end."

Joan Glance Fernandes
Lamar, Texas

"The purpose of these meetings is to hear from the handicapped themselves about their problems and needs. Of the 300 persons who attended the regional conference, 150 were handicapped, about 75 were parents of handicapped persons and another 75 were professional people who work in programs for handicapped individuals. That was a very good representation."

John Winters
Northwest Florida Society for
Crippled Children and Adults
Pensacola, Florida

"I have attended hundreds of conferences, but this was my first experience at a large conference for handicapped people. From my observations of the Colorado White House Conference, I would say that other groups could take a lesson from these people in their earnest endeavors to accomplish a meaningful and productive experience for each person in attendance. In spite of their handicaps, they did just that."

Mrs. Elaine Clearfield
Denver, Colorado

"Most importantly, the work of the White House Conference should be seen as just a beginning in the fight to erase the barriers that traditionally have troubled handicapped people. We're not looking at this as a one-shot thing. This is something that will be continued."

Ms. Marienne Fields
Cincinnati, Ohio

"I'm elated to be elected a delegate to the White House Conference in Washington. This is a stepping-stone. It's the first conference of which we, as disabled individuals, hope to have many."

LeRoy Wells
La Crosse, Wisconsin

"Handicapped people have been silent for a long time about the discrimination they face every day in areas such as employment, health care, education, housing and recreation. We look at the White House Conference as our chance to be heard."

Jack Martin
Seattle, Washington

Many of us feel that the handicapped in America have a unique opportunity through the White House Conference. With its pre-conference activities on the local and State level, it gives us a real chance to have input in keeping with the American system. If we are willing to accept our share of responsibility for community action, we can, and will, improve our own lot in life and that of future generations."

Bill Kiser
Winston-Salem, North Carolina

"The West Virginia White House Conference was a very productive meeting. It gave handicapped persons a chance to voice their problems concerning medical, financial, insurance and job needs. Hopefully, it will provide an impetus for legislation at the national level to benefit handicapped people."

Joe Yaneris
Webster Springs, West Virginia

"I am pleased there will be an opportunity for Minnesota's handicapped persons to contribute to the White House Conference in Washington. The statement of the experience and needs of handicapped people in our State has much to offer the National decision-makers."

Gov. Wendell Anderson
Minneapolis, Minnesota

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Ballot: Issue HEC III-3

	Recommendation	Priority Vote 1st	2nd	3rd
HEC III-3 HEALTH CONCERNS–DIAGNOSIS				
What is the most effective and efficient way to insure early identification of handicapping conditions?				
A. TRAINING PROFESSIONALS	A	( )	( )	( )
The quality and quantity of training of professionals in early identification should be improved.				
B. EARLY SCREENING	B	( )	( )	( )
Schools, well-baby clinics and Early Periodic Screening, Diagnosis and Treatment programs should sponsor screening programs for biochemical defects at birth and during childhood.				
C. TRAINING/CONSUMERS	C	( )	( )	( )
The quality and quantity of training for consumers should be improved. Public should be made aware of importance of early identification.				
D. COORDINATION	D	( )	( )	( )
Improvements should be made in the coordination of federal programs.				
E. INFORMATION CLEARINGHOUSE	E	( )	( )	( )
State health, education and social services departments should pool their information on the handicapped in a clearinghouse format.				
F. CONFERENCES	F	( )	( )	( )
Regional and state conferences should be held to train professionals and paraprofessionals in screening and genetic counseling.				
G. REGIONAL CENTERS	G	( )	( )	( )
Establish or expand regional centers through State Health Departments or universities to provide pre- and post-natal and children's services and genetic counseling. Multidisciplinary teams would insure effective follow-up treatment locally.				
H. HIGH SCHOOL STUDENTS	H	( )	( )	( )
High school students should be educated about handicapping conditions.				

Ballot: Issue HEC III-3

	Recommendation	Priority Vote 1st	2nd	3rd
I. DIAGNOSTIC TRAINING For all fedrally funded programs professional health training curricula should require training in diagnostic skills.	I	( )	( )	( )
J. INSURANCE Screening and routine tests should be financed by private insurance.	J	( )	( )	( )
K. NHI National health insurance should be enacted.	K	( )	( )	( )
L. SUPPORT STAFF Support staff to children's programs should be increased by 30 percent.	L	( )	( )	( )
M. NURSERY SCHOOLS Mandatory infant and nursery schools should be provided for deaf children.	M	( )	( )	( )
N. AWARENESS States should mandate public awareness programs.	N	( )	( )	( )
O. TRANSPORTATION Transportation should be provided to diagnostic facilities.	O	( )	( )	( )
P. PARAMEDICS Paramedics, perhaps Vietnam veterans trained as medics, should be used for screening and early identification.	P	( )	( )	( )
Q. HANDICAPPED PROFESSIONALS Handicapped professionals should be employed in diagnostic programs.	Q	( )	( )	( )
R. EXPAND SERVICE/SCOPE Preventive services and populations served by State Health Departments should be expanded.	R	( )	( )	( )
S. NATIONAL CRITERIA A national criteria to identify high risk groups should be developed.	S	( )	( )	( )

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Ballot: Issue HEC III-3

	Recommendation	Priority Vote 1st	2nd	3rd
T. DIAGNOSTIC TESTS A listing of diagnostic tests with HEW funding should be prepared.	T	( )	( )	( )
U. SCREENING ASSESSMENT The results of presently funded screening programs should be assessed.	U	( )	( )	( )
V. MUSCULAR DYSTROPHY Information should be provided on muscular dystrophy.	V	( )	( )	( )
W. HIGH SCHOOL P.E. The Bureau of Education for the Handicapped should fund development of curriculum for high school physical education programs.	W	( )	( )	( )
X. COMMUNITY HOSPITALS The role of community hospitals should be enhanced.	X	( )	( )	( )
Y. SCHOOL NURSES Schools nurses should be utilized as aides to handicapped students.	Y	( )	( )	( )
Z. VISION TESTS There should be a Federal mandate for vision tests in schools.	Z	( )	( )	( )
AA. HEALTH EXAMS Health examinations for infants from birth to school age should be mandated.	AA	( )	( )	( )
BB. LOBBY Organize parents and advocacy groups to lobby legislatures.	BB	( )	( )	( )
CC. MOBILE VANS Mobile vans should provide free annual screening.	CC	( )	( )	( )
DD. MANDATORY REPORTING Federal and/or state guidelines should provide for mandatory reporting of handicaps by diagnosing physician, and referral to the appropriate agencies.	DD	( )	( )	( )

Ballot: Issue HEC III-3

	Recommendation	Priority Vote 1st	2nd	3rd
EE. GENETIC COUNSELING	EE	( )	( )	( )
Establish a genetic counseling clinic to identify and counsel families at risk.				
FF. REGISTRY	FF	( )	( )	( )
Enact state laws requiring the registry of at risk population. Follow-up screening by teams through state health divisions.				

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Ballot: Issue HEC III-1

Recommendation		Priority Vote 1st	2nd	3rd
HEC III-1 HEALTH CONCERNS—DIAGNOSIS				
How can diagnostic teams be made available to all citizens for all handicapping conditions?				
A. REGIONAL CENTERS—MOBILE LABS Regional centers should be established with outreach programs for diagnosis, referral, and treatment. Outreach programs to utilize mobile laboratories and diagnostic teams to provide services to rural areas.	A	( )	( )	( )
B. LOCAL CENTERS Federal and state governments should subsidize local screening, diagnostic, and information centers to provide services in a consistent and coordinated manner.	B	( )	( )	( )
C. TRAINING/CONTINUING EDUCATION Physicians should be educated in diagnosis and treatment of handicapping conditions and continuing education should be provided all paraprofessionals.	C	( )	( )	( )
D. INFORMATION/REFERRAL SERVICES Centralized information services should be established to augment the limited services of some facilities and to enable better communications to public regarding availability of services. Community directories of services should be developed and newsletters established identifying new and modified services.	D	( )	( )	( )
E. MULTI-DISCIPLINARY TEAMS Federal government should support multi-disciplinary diagnostic teams utilizing medical, non-medical, paraprofessionals, family and patient.	E	( )	( )	( )
F. PUBLIC EDUCATION Federal government should provide leadership and assistance to states in public education programs.	F	( )	( )	( )
G. CITIZEN LOBBIES Physicians and clinics should be encouraged to utilize citizen lobbies.	G	( )	( )	( )
H. AGENCY COORDINATION There should be better agency coordination of programs to prevent duplication and fragmentation of services. Service delivery systems should be organized to offer comprehensive treatment.	H	( )	( )	( )

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Ballot: Issue HEC III-1

	Recommendation	Priority Vote 1st	2nd	3rd
I. YEARLY PHYSICAL EXAMS	I	( )	( )	( )
Yearly physical examinations should be required by schools.				
J. SCHOLARSHIPS	J	( )	( )	( )
Scholarships should be provided to train professionals.				
K. NATIONAL INSTITUTE ON HANDICAPPING CONDITIONS	K	( )	( )	( )
Establish a National Institute on Handicapping Conditions to consist of a data bank of all available information affecting the handicapped, a consumer registry of doctors, health care workers, available services, etc. NIHC should operate an ombudsman program to investigate and coordinate the utilization of the various resources for individual and group situations. All government and privately funded research should be coordinated and awareded through NIHC.				

Ballot: Issue HEC III-2

Recommendation	Priority Vote 1st	2nd	3rd

HEC III-2 HEALTH CONCERNS–DIAGNOSIS

How can early diagnosis be guaranteed throughout the life of all individuals so as to minimize the risk of a physical or mental difficulty becoming compounded?

A. TRAIN PROFESSIONALS — A ( ) ( ) ( )

Physicians, public health nurses, teachers, students and other professionals and paraprofessionals should be trained in early identification of chronic conditions.

B. MANDATORY SCREENING — B ( ) ( ) ( )

Mandatory universal screening and annual checkups should be provided.

C. PHYSICIAN REFERRAL — C ( ) ( ) ( )

Physicians should be mandated to refer parents of developmentally disabled children to supplementary services, and subsidize the Developmental Disabilities "Home Trainer" concept.

D. INFORMATION CLEARINGHOUSES — D ( ) ( ) ( )

State and/or local clearinghouses should be established, subsidized by federal and state governments.

E. REGISTRY — E ( ) ( ) ( )

Voluntary state registries for treatment and follow-up should be established.

F. CLINICS — F ( ) ( ) ( )

Clinics should be funded for low income families.

G. PUBLIC AWARENESS — G ( ) ( ) ( )

Establish multidisciplinary committees of consumers and professionals to set up public awareness programs on diagnosis and available diagnostic teams.

H. MANDATORY EDUCATION — H ( ) ( ) ( )

Programs on family health education and genetic counseling should be mandatory.

I. NHI — I ( ) ( ) ( )

National health insurance should be provided for diagnosis and follow-up in children aged 1-5.

	Ballot: Issue HEC III-2			
	Recommendation	Priority Vote 1st	2nd	3rd
J. EARLY DIAGNOSIS/TREATMENT–MENTAL DISABILITIES	J	( )	( )	( )
Early diagnosis and treatment should be emphasized for mental and emotional disabilities.				
K. MEDICAL RECORDS	K	( )	( )	( )
Free access to medical records should be assured.				
L. LICENSING BOARD	L	( )	( )	( )
A licensing board should be appointed for professionals working with handicapped individuals.				
M. SCHOOL ADJUSTMENT SERVICES	M	( )	( )	( )
School adjustment services should be provided for handicapped children.				
N. DIAGNOSTIC PROCEDURES	N	( )	( )	( )
Those diagnostic procedures funded by insurance companies should be identified.				
O. EQUAL BENEFITS	O	( )	( )	( )
Benefits should be equalized across state lines.				
P. VOLUNTEERS–TRAINING	P	( )	( )	( )
Train volunteers to meet baby sitting, transportation, and other ancillary needs.				
Q. FETA–TRAIN PROVIDERS	Q	( )	( )	( )
Proposals under the Federal Employment Training Act should be initiated to provide training for service providers.				
R. REGIONAL CENTERS	R	( )	( )	( )
Use regional rehabilitation centers for research, rehabilitation and training.				

Ballot: Issue HEC III-8

	Recommendation	Priority Vote 1st	2nd	3rd
HEC III-8 HEALTH CONCERNS–DIAGNOSIS				
How can we assure that effective treatment will follow diagnosis?				
A. COMPUTERIZED SYSTEMS	A	( )	( )	( )
Computerized regional diagnostic, evaluation and referral systems should be established.				
B. CLEARINGHOUSES	B	( )	( )	( )
Clearinghouses to disseminate information on existing resources should be established.				
C. PUBLICIZE SERVICES	C	( )	( )	( )
More adequate communication and publicity to enable handicapped persons to know where to go for follow-up services should be provided.				
D. PARENT INVOLVEMENT IN TREATMENT	D	( )	( )	( )
Parents should be involved in developing treatment plans.				
E. INSURANCE COVERAGE	E	( )	( )	( )
Insurance should cover all diagnosis and treatment.				
F. RURAL SUPPORT	F	( )	( )	( )
More support services for rural areas should be established. Funds for multi-disciplined teams should be allotted to provide services to rural and low-resource geographical areas.				
G. RESEARCH	G	( )	( )	( )
Continuing research to improve treatment should be conducted.				
H. EXPAND DEVELOPMENTAL DISABILITIES PROGRAMS	H	( )	( )	( )
Developmental Disabilities Service Coordination Program should be expanded.				
I. ADVOCACY PROGRAMS	I	( )	( )	( )
Advocacy programs should be established.				
J. PHYSICIAN EDUCATION	J	( )	( )	( )
Physicians should be better educated in the management of long-term chronic illnesses and disabilities.				

Ballot: Issue HEC III-8

Recommendation	Priority Vote 1st	2nd	3rd
K. AGENCY COORDINATION Better agency coordination should be facilitated to prevent duplication and fragmentation of services.	K ( )	( )	( )
L. TRANSPORTATION Transportation should be provided to treatment facilities.	L ( )	( )	( )
M. ADVISORY BOARDS A consumer advisory board should be established to augment state health departments implementation activities.	M ( )	( )	( )
N. LINKAGES Research, education, and treatment processes should be linked physically and conceptually (e.g., in rehabilitation centers).	N ( )	( )	( )
O. PHYSICIAN INCENTIVES Economic incentives should be provided for physicians.	O ( )	( )	( )
P. FUNDING Legislation should be enacted to assure adequate funding for treatment, following diagnosis.	P ( )	( )	( )
Q. REHABILITATION AND ENGINEERINGS Ties between rehabilitation and engineering services should be expanded.	Q ( )	( )	( )
R. LOW-COST CLINICS Funding should be available for low-cost clinics.	R ( )	( )	( )

Ballot: Issue HEC III-5

Recommendation	Priority Vote 1st	2nd	3rd

HEC III-5 HEALTH CONCERNS–DIAGNOSIS

How can a public awareness program help to develop a better understanding of the needs to provide diagnostic service?

A. PUBLIC EDUCATION BY MEDIA

A ( ) ( ) ( )

The federal government should develop multimedia programs to inform the public about various handicaps; to publicize the need for and benefit of early diagnostic services, with special attention to high risk populations.

B. MYTHS

B ( ) ( ) ( )

The public should be educated regarding mental health preservation, destigmatization of mental illness, debunking of misinformation, techniques to determining potentially serious problems in oneself or a family member, and guidance to services available to prevent further deterioration.

C. TRAINING

C ( ) ( ) ( )

Increase funding for training of providers.

HEC III-7 HEALTH CONCERNS–DIAGNOSIS

How should the public and private sectors collaborate in a joint effort to help parents in knowing where to obtain professional diagnostic advice?

	Ballot: Issue HEC III-7			
	Recommendation	Priority Vote 1st	2nd	3rd
A. EARLY PERIODIC SCREENING, DIAGNOSIS AND TREATMENT Public-private efforts should be used for fuller implementation of Early Periodic Screening, Diagnosis and Treatment.	A	( )	( )	( )
B. RESEARCH PROJECTS Providers of services, related professionals, insurance companies and other private businesses, and handicapped individuals should encourage research projects in which they all are involved.	B	( )	( )	( )
C. STATEWIDE DIAGNOSTIC SYSTEMS Public and private agencies (such as community agencies and school systems) should collaborate on and coordinate statewide diagnostic and evaluation system.	C	( )	( )	( )
D. MULTI-LINGUAL HOTLINES Multi-lingual hotline should be estab ished for referral to diagnostic services.	D	( )	( )	( )
E. PARENT EDUCATION Federal/state subsidies should be prov ded to coordinate public and private efforts to inform parents about existing diagnostic centers.	E	( )	( )	( )
F. FUTURE PARENT EDUCATION Education for living programs should include information to future parents to prevent damage to their reproductive organs, specifically to gonad, from environmental pressures.	F	( )	( )	( )
G. NURSES INCENTIVES Public health nurses should be given incentives and accreditation to enhance their education.	G	( )	( )	( )

	Ballot: Issue HEC III-7			
	Recommendation	Priority Vote 1st	2nd	3rd
H. ACCREDITATION	H	( )	( )	( )
State governments should pass legislation to facilitate accreditation for professionals moving into a different geographic area.				
I. PROFESSIONAL EDUCATION	I	( )	( )	( )
There should be more emphasis on education of physicians in care of handicapped.				

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	Ballot: Issue HEC III-4			
	Recommendation	Priority Vote 1st	2nd	3rd
HEC III-4 HEALTH CONCERNS–DIAGNOSIS				
How can labeling or other categorization of the handicapped individual be avoided, even though such categories may have some administrative value for planning funding?				
A. INTEGRATION	A	( )	( )	( )
The handicapped should be integrated in regular home, school and work environments.				
B. LABELING	B	( )	( )	( )
Discriminatory labeling should be eliminated from state job application forms.				
C. DRIVERS LICENSE	C	( )	( )	( )
Handicapped persons applying for drivers license should be evaluated on an individual basis.				
D. ACCESSIBLE SCHOOLS	D	( )	( )	( )
Schools should be made accessible to disabled children at an early age to reduce the stigma of disabilities.				
E. MANDATORY REPORTING	E	( )	( )	( )
Federal and/or state guidelines should provide for the mandatory reporting of handicaps by the diagnosing physician, and referral to the appropriate state agencies.				
F. EDUCATE PUBLIC	F	( )	( )	( )
Educate community and providers to needs of handicapped.				
G. PRIVACY LEGISLATION	G	( )	( )	( )
Enact legislation to protect privacy of handicapped.				

Ballot: Issue HEC III-6

	Recommendation	Priority Vote 1st	2nd	3rd
HEC III-6 HEALTH CONCERNS—DIAGNOSIS				
How can we better understand the need to provide diagnostic services for all types and degrees of handicaps?				
A. EARLY DETECTION	A	( )	( )	( )
The importance of early identification and detection should be stressed.				
B. COUNTY BASED TRAINING	B	( )	( )	( )
Establish county based training of community service providers in early identification and causes of disabling conditions.				
C. PARENT COUNSELING	C	( )	( )	( )
Parents should be trained about specific disabilities via individualized counseling services provided by health clinics or family physicians.				
D. PERIODIC EXAMS	D	( )	( )	( )
Periodic examinations should be given to population as preventive measure.				

Ballot: Issue HEC IV-2

	Recommendation	Priority Vote 1st	2nd	3rd
HEC IV-2 HEALTH CONCERNS–PREVENTION				
In the fields of maternal and infant care, how can we direct attention to environmental conditions and other high risk factors which can cause developmental disabilities?				
A. TRAINING OF PUBLIC HEALTH NURSES	A	( )	( )	( )
Training of public health nurses for service in rural areas should be stressed.				
B. ADULT PREVENTIVE EDUCATION	B	( )	( )	( )
The public school system should offer adult education courses in prevention for all citizens; information should also be provided on available services.				
C. PRENATAL CARE EDUCATION	C	( )	( )	( )
Education programs on prenatal hazards and prevention should be developed, and information provided on prenatal care locations.				
D. PRENATAL TESTING	D	( )	( )	( )
Prenatal testing should be mandated. The availability of fetal monitoring services and neo-natal care should be expanded.				
E. EARLY SCREENING	E	( )	( )	( )
All children should be screened at an early age through the public school system.				
F. HEALTH PROVIDER EDUCATION	F	( )	( )	( )
Health providers should be educated concerning genetic counseling, nutrition and other preventive measures; continued education should be encouraged.				
G. EMPLOYER ACCOUNTABILITY	G	( )	( )	( )
Employers should be held accountable for the safety of pregnant employees.				
H. INSUROR INCENTIVE SYSTEM	H	( )	( )	( )
Some form of insuror incentive system should be developed to encourage prevention and care.				

Ballot: Issue HEC IV-2

	Recommendation	Priority Vote 1st	2nd	3rd
I. ADVISORY BOARD FOR PUBLIC AWARENESS CAMPAIGNS An advisory board composed of disability group representatives, medical personnel and paraprofessionals should supervise all media campaigns aimed at educating the public.	I	( )	( )	( )
J. PAID TV SPOTS The federal government should allocate funds for paid TV spots to educate the public.	J	( )	( )	( )
K. NATURAL CHILDBIRTH Natural Childbirth should be encouraged.	K	( )	( )	( )
L. HIGH RISK REGISTRY A registry of people at high-risk should be developed.	L	( )	( )	( )
M. OMBUDSMAN SYSTEM An ombudsman system should be created to effect action, provide referrals and evaluate program effectiveness.	M	( )	( )	( )
N. PUBLIC SCHOOL EDUCATION A standardized syllabi for teaching health care for all 12 grades should be developed, and a minimum knowledge of health care should be required to graduate from high school.	N	( )	( )	( )
O. PRE-MARITAL TESTS Complete physical examination and screening tests should be required prior to marriage.	O	( )	( )	( )
P. COMPREHENSIVE HEALTH CARE Provide comprehensive health care to all pregnant women with adequate nutrition for all infants and children.	P	( )	( )	( )
Q. FUND DIAGNOSTIC SERVICES Increase funding for diagnostic and evaluation services.	Q	( )	( )	( )
R. WARNING LABELS Commercial products such as insect spray should containing warning it may be harmful to a fetus.	R	( )	( )	( )

	Ballot: Issue HEC IV-2			
	Recommendation	Priority Vote 1st	2nd	3rd
S. GENETIC COUNSELING	S	( )	( )	( )
Provide genetic counseling pre- and post-marital—create university courses and general education of public.				
T. ACCIDENT PREVENTION	T	( )	( )	( )
Provide stricter licensure laws and prevention campaigns.				
U. TRAVEL REIMBURSEMENT	U	( )	( )	( )
Provide funds to individuals for travel to treatment.				
V. TRAVELING TEAMS	V	( )	( )	( )
Provide traveling diagnostic teams to rural areas.				
W. HIGH RISK—EDUCATION	W	( )	( )	( )
Information on high risk factors should be provided through health care clinics. Government funding for education of high risk groups should be provided.				

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Ballot: Issue HEC IV-6

	Recommendation	Priority Vote 1st	2nd	3rd
HEC IV-6 HEALTH CONCERNS—PREVENTION				
What should be done in the field of federal and state legislation so that the prevention of handicapping conditions is addressed in a comprehensive manner and adequate funding is provided?				
A. INDUSTRY	A	( )	( )	( )
The advantages of prevention efforts should be demonstrated to industry.				
B. FUNDING/LONG-RANGE PLANNING	B	( )	( )	( )
Additional funding support should be sought and long-range planning increased for prevention activities.				
C. EMPLOYERS RESPONSIBLE FOR SAFETY	C	( )	( )	( )
Employers should be made legally responsible for the safety of working conditions and the work environment.				
D. CLEARINGHOUSE	D	( )	( )	( )
A clearinghouse for statistical/anecdotal information which would be useful in lobbying efforts should be developed and used by handicapped persons.				
E. MANDATORY PRENATAL TESTING	E	( )	( )	( )
Funding should be provided for mandatory prenatal testing.				
F. WISHA AND OSHA	F	( )	( )	( )
The Federal Occupational and Washington State Industrial Safety and Health Administrations should be granted additional funding and manpower to enforce existing laws.				
G. STATE-BY-STATE FUNDING	G	( )	( )	( )
The 1973 Vocational Rehabilitation Act should be amended to provide state-by-state funding for handicap prevention.				
H. STATE/LOCAL HEALTH PLANS	H	( )	( )	( )
State and local health plans should be required to specifically address prevention in order to secure federal funding.				

	Ballot: Issue HEC IV-6			
	Recommendation	Priority Vote 1st	2nd	3rd
I. PREVENTION LEGISLATION	I	( )	( )	( )
Prevention legislation should be a top priority of advocacy groups and providers working together.				
J. PREVENTION COMPONENT	J	( )	( )	( )
Organizations dealing with the handicapped should be required to develop a prevention component within their programs.				
K. LISTING/HANDICAPPING CONDITIONS	K	( )	( )	( )
A listing of handicapping conditions on drivers licenses should be required, and law enforcement officers should be trained to work with the handicapped.				
L. PUBLIC SCHOOL PREVENTIVE HEALTH CURRICULA	L	( )	( )	( )
State Education Departments should develop preventive health curricula for secondary schools.				
M. SOCIAL CONTRIBUTIONS OF HANDICAPPED	M	( )	( )	( )
The social contributions of the handicapped should be publicized.				
N. RESEARCH, COST/BENEFIT ANALYSES	N	( )	( )	( )
The advantages of making preventive treatment compensable should be identified and publicized through research, cost/benefit analyses, etc.				
O. REGIONAL DISABILITY PREVENTION PROGRAMS	O	( )	( )	( )
Regional based community programs in disability prevention should be instituted.				
P. FAMILY TRAINING/CARE	P	( )	( )	( )
Resources and training should be provided to increase the effectiveness of family-provided care of the handicapped.				
Q. HOSPITAL DISCHARGE PLANS	Q	( )	( )	( )
Hospitals should develop patient discharge planning programs to include community education, referral and feedback.				
R. INTERAGENCY COMMUNICATIONS	R	( )	( )	( )
Agencies should be encouraged to communicate among themselves in order to prevent duplication of services.				

	Ballot: Issue HEC IV-6			
	Recommendation	Priority Vote 1st	2nd	3rd
S. PUBLIC EDUCATION CAMPAIGNS Finance public education campaigns with Federal money.	S	( )	( )	( )
T. PUBLIC EDUCATION CAMPAIGNS Tax cigarettes to fund education campaigns.	T	( )	( )	( )
U. ADVOCACY Set up state advocacy agencies.	U	( )	( )	( )
V. STATE LEGISLATION Enact state legislation to implement prevention programs.	V	( )	( )	( )
W. PRE-NATAL DIAGNOSIS–HIGH RISK POPULATION Funding should be provided to diagnostic clinics to provide pre-natal diagnosis to the high-risk population; to cover patient transportation costs and the development of a public awareness program.	W	( )	( )	( )
X. PUBLIC FINANCING POLICY The political process should be stimulated to decide the extent of public finances available for health care services.	X	( )	( )	( )

HEC IV-1 HEALTH CONCERNS–PREVENTION

How can a higher priority in the allocation of national and state health resources be given to prevention?

Ballot: Issue HEC IV-1

	Recommendation	Priority Vote 1st	2nd	3rd
A. HEALTH INSURANCE COVERAGE	A	( )	( )	( )
Federal and state legislation should be enacted to mandate third party insurance coverage of preventive health services.				
B. PREVENTION COST/BENEFITS	B	( )	( )	( )
Data concerning the cost/benefits of preventive health care should be presented to the public and to all state and federal legislators to stimulate action.				
C. DRUG ABUSE AND ALCOHOLISM	C	( )	( )	( )
Mass media should be used to educate the public, especially regarding alcoholism and drug abuse.				
D. TAX EXEMPT ORGANIZATIONS	D	( )	( )	( )
Tax exempt organizations should be required to do some form of public education regarding prevention.				
E. PREVENTION COSTS/BENEFITS	E	( )	( )	( )
Additional research on the cost/benefits and efficiency of prevention measures should be funded.				
F. COUNTY HEALTH DEPARTMENTS	F	( )	( )	( )
Prevention-oriented health departments should be encouraged in every county.				
G. INFORM COMMUNITY LEADERS	G	( )	( )	( )
Seminars and/or other educational devices can be developed by state health departments, the Center for Disease Control, or other agencies to inform community leaders of the significance of a preventive approach and those actions which a community can take to help prevent health hazards.				
H. PRENATAL CARE	H	( )	( )	( )
Prenatal care should be taught to all young girls.				
I. PUBLIC EDUCATION	I	( )	( )	( )
Public education should emphasize preventive education and screening.				

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Ballot: Issue HEC IV-1

	Recommendation	Priority Vote 1st	2nd	3rd
J. PROPER CARE OF EYES The public should be educated concerning the proper care of eyes.	J	( )	( )	( )
K. LOBBYING GROUPS Lobbying groups on the state and local levels should pressure their Departments of Health to expand the use of health personnel in preventive services such as public education about preventable disease and accidents; industrial and environmental exposures and their monitoring and prevention; and improvement and broadening of genetic counselling, prenatal services, well baby care, and proper living habits. Nurse practitioners and physicians' assistants could be trained and used to provide these preventive services.	K	( )	( )	( )
L. TAX INCENTIVES A federal and state tax write-off should be allowed as an incentive for seeking out and using preventive services.	L	( )	( )	( )
M. PREVENTION TRAINING The federal government should mandate training in prevention and patient education in professional schools.	M	( )	( )	( )
N. EDUCATIONAL PACKAGES The public school system can be an effective strategy only if teachers are fully prepared; systematic educational packages (such as the Pennsylvania Plan) should therefore be implemented.	N	( )	( )	( )
O. PRENATAL CARE COVERAGE National health insurance should provide universal and equal coverage of prenatal care.	O	( )	( )	( )
P. RESOURCES LISTINGS All available local resources should be listed in the phonebook yellow pages.	P	( )	( )	( )
Q. FUNDING PRIORITIES Funding priorities for the National Institute for Neurological and Communicative Disorders and Stroke and for NIH programs generally should be raised.	Q	( )	( )	( )
R. PREVENTIVE SERVICES Local committees should be established to assess community prevention services needs.	R	( )	( )	( )

	Ballot: Issue HEC IV-1			
	Recommendation	Priority Vote 1st	2nd	3rd
S. IMMUNIZATION Additional funds should be provided for immunization programs.	S	( )	( )	( )
T. PREVENTION/TREATMENT FUNDING The government should fund prevention/treatment at 1/10 ratio.	T	( )	( )	( )
U. EMERGENCY MEDICAL SERVICES FUNDS More federal assistance programs should be provided to state, regional and community organizations to improve emergency medical services (such as the grants under the Emergency Medical Services Act of 1973, PL 93-154).	U	( )	( )	( )
V. PREVENTIVE CARE FUNDS State/local governments should fund preventive care.	V	( )	( )	( )
W. PRENATAL CARE Obstetric assistants/nurses shall be more thoroughly trained in proper prenatal care.	W	( )	( )	( )
X. CONSUMER ADVOCACY Consumer advocacy groups should encourage companies to be responsible for what they produce.	X	( )	( )	( )
Y. DEPARTMENT OF HUMAN GENETICS Establish a Department of Human Genetics in every medical school.	Y	( )	( )	( )
Z. AWARENESS CAMPAIGN Fund federal awareness campaigns regarding need for alternate modes of living for handicapped.	Z	( )	( )	( )
AA. PUBLIC INFORMATION Provide public information through health clinics, hospitals, and general practitioners.	AA	( )	( )	( )

HEC IV-8 HEALTH CONCERNS–PREVENTION

How can people become aware of the need to educate themselves on healthful life styles?

	Ballot: Issue HEC IV-8			
	Recommendation	Priority Vote 1st	2nd	3rd
A. PUBLIC SCHOOL EDUCATION	A	( )	( )	( )
Effective education at the elementary and secondary school levels should be emphasized, particularly in the areas of health instruction. Necessary curricula should be developed and teacher manpower increased to meet this need.				
B. SEX EDUCATION	B	( )	( )	( )
Sex education and family planning courses should be included in the high school curriculum.				
C. TEACHER CERTIFICATION REQUIREMENTS	C	( )	( )	( )
Elementary and secondary teachers should be required to meet specific health instruction requirements for certification.				
D. PUBLIC SCHOOL EDUCATION PROGRAM FUNDING	D	( )	( )	( )
HEW should underwrite public school education programs in prevention.				
E. MATCHING FUNDS	E	( )	( )	( )
HEW should underwrite prevention education through matching funds with state and private organizations.				
F. MEDICAL SCHOOL CAPITATION GRANTS	F	( )	( )	( )
Education in prevention and handicapping conditions should be required in medical schools capitation grants.				
G. PROGRAM SCREENING AND EVALUATION	G	( )	( )	( )
Health education programs should be screened and evaluated for their effectiveness.				
H. PRACTICAL PUBLIC EDUCATION	H	( )	( )	( )
Public education efforts should emphasize practical preparation for living, emotional stability, and use of leisure.				
I. MULTIMEDIA CAMPAIGN	I	( )	( )	( )
HEW should fund a massive multimedia educational campaign covering all ages.				

Ballot: Issue HEC IV-8

	Recommendation	Priority Vote 1st	2nd	3rd
J. PARENT EDUCATION	J	( )	( )	( )
Preventive child care should be encouraged by educating parents to provide affectionate, consistent and healthful care to infants.				
K. FAMILY CARE	K	( )	( )	( )
Special education programs should be developed for families who must care for a disabled member.				
L. ADULT EDUCATION	L	( )	( )	( )
Adult education programs should be developed which are geared to realistic life style experiences; special programs should be developed for persons who have experienced traumatic life changes.				
M. SENSITIZING HEALTH AGENCIES	M	( )	( )	( )
Health screening service agencies should be sensitized to the need for education on healthful life styles.				
N. MEASLES VACCINATION	N	( )	( )	( )
Measles vaccination should be required.				
O. PREVENTIVE EDUCATION PROGRAMS	O	( )	( )	( )
Preventive education programs should be made more interesting and comprehensive; professional public relations skills should be utilized.				
P. QUALITY OF MEDICAL CARE	P	( )	( )	( )
The public should be educated in the quality of medical care needed to implement healthy life styles.				

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Ballot: Issue HEC IV-3

	Recommendation	Priority Vote 1st	2nd	3rd
HEC IV-3 HEALTH CONCERNS–PREVENTION				
What can be done to generate greater public concern for genetic counseling in the prevention of birth defects due to inherited disorders?				
A. COMPREHENSIVE HEALTH EDUCATION	A	( )	( )	( )
Comprehensive health education, including health, hygiene and sex education, should be provided in both public and private schools.				
B. GENETICS EDUCATION	B	( )	( )	( )
Detailed education in genetics mechanisms and diseases should be provided at the junior and senior high school levels.				
C. EDUCATION IN LIVING	C	( )	( )	( )
Education in living should be made a mandatory part of the education curriculum.				
D. TRAINING PROFESSIONALS	D	( )	( )	( )
Adequate information and training should be provided to medical professionals so that they make good referrals for genetic counseling services.				
E. ADVERTISE GENETIC COUNSELING	E	( )	( )	( )
The availability of genetic counseling services should be advertised through the mass media, working through local advertising agencies.				
F. EXPEDITE DISSEMINATION OF NEW INFORMATION	F	( )	( )	( )
All agencies in the health care field should be required to provide new information to the public as soon as possible.				
G. EXPAND COUNSELING SERVICES	G	( )	( )	( )
Available counseling services should be expanded.				
H. TRAVELING CONSULTANTS	H	( )	( )	( )
Funding should be provided for traveling consultants for counseling and education purposes.				
I. MEDICAL COLLEGES	I	( )	( )	( )
Greater use should be made of services and research capabilities of medical colleges.				

Ballot: Issue HEC IV-3

	Recommendation	Priority Vote 1st	2nd	3rd
J. FAMILY PLANNING	J	( )	( )	( )
Genetic counseling should be provided for in funding for planning and maternal/infant care services.				
K. DETECTION OF DEFECT	K	( )	( )	( )
Immediate services should be provided when defect/disorder is detected.				
L. EDUCATE POOR PEOPLE	L	( )	( )	( )
A special effort should be made to provide services education for poor people.				
M. VOLUNTARY REGISTRATION	M	( )	( )	( )
A massive voluntary registration program should be organized to identify persons with genetic disorders for prevention purposes.				
N. ALCOHOL/DRUG ABUSE RISKS	N	( )	( )	( )
Greater use of the public media should be made in educating the public about alcohol and drug abuse risks and various risk reduction methods.				
O. TRAINING GENETIC COUNSELORS/TEACHERS	O	( )	( )	( )
Efforts should be made to ensure that genetic counselors/teachers receive adequate training.				
P. ASSISTANCE REGISTRY	P	( )	( )	( )
A constantly updated registry of available assistance sources should be provided.				
Q. INFORMATION CLEARINGHOUSE/NIHC	Q	( )	( )	( )
A National Institute of Handicapping Conditions should be created as a central source of all information affecting the disabled. Funding should be provided by HEW or through FICA taxes for staff who should be drawn from all fields related to the disabled and who primarily should be the disabled themselves. A mass media program and toll-free hotline should be developed.				
R. CONSUMER ADVOCACY	R	( )	( )	( )
Consumer groups must become actively involved, i.e., through the establishment of a "National Coalition of the Disabled".				
S. REGIONAL GENETIC CENTER	S	( )	( )	( )
Develop a regional genetic center for Puerto Rico and Virgin Islands.				

Ballot: Issue HEC IV-3

	Recommendation	Priority Vote 1st	2nd	3rd
T. GENETIC TESTING/COUNSELING BEFORE AGE 12 Genetic testing/counseling should be required, preferably before the age of 12.	T	( )	( )	( )
U. GENETIC TESTING/COUNSELING PRIOR TO MARRIAGE Genetic testing/counseling should be required for persons about to marry.	U	( )	( )	( )
V. MASS MEDIA Provide mass media programs.	V	( )	( )	( )
W. GENETIC RESEARCH Provide research funds in genetics.	W	( )	( )	( )
X. BLOOD TESTS Require blood tests for couples living together.	X	( )	( )	( )

Ballot: Issue HEC IV-4

	Recommendation	Priority Vote 1st	2nd	3rd
HEC IV-4 HEALTH CONCERNS–PREVENTION				
How can we demonstrate the benefits of preventing accidents and diseases that cause handicapping conditions?				
A. PRESCHOOL VACCINATIONS	A	( )	( )	( )
All loopholes in the rules governing preschool vaccination of children should be closed, and additional funding provided for this effort.				
B. HEALTH AND SAFETY EDUCATION	B	( )	( )	( )
Health and safety education, including such topics as drug abuse, accident prevention, genetic counseling, etc., should be supported.				
C. MASS MEDIA DECISION-MAKERS–EDUCATE	C	( )	( )	( )
Mass media decision-makers should be educated regarding the importance of prevention.				
D. HANDICAPPED IN PREVENTIVE EDUCATION	D	( )	( )	( )
The handicapped should be utilized in preventive education efforts to describe their experiences and the causes of their handicaps.				
E. INCREASED REPORTING	E	( )	( )	( )
A national effort should be mounted to increase the reporting of diseases, accidents and high risk conditions and increase information on their causes.				
F. PUBLIC AWARENESS	F	( )	( )	( )
Public awareness programs should be conducted on federal, state and local levels with support from insurance companies, the National Advertising Council, etc.				
G. MULTI-MEDIA CAMPAIGN	G	( )	( )	( )
Multi-media campaign on maternal and child care.				
H. INFORMATION	H	( )	( )	( )
Provide information via health clinics, hospitals, general practitioners.				

	Ballot: Issue HEC IV-4			
	Recommendation	Priority Vote 1st	2nd	3rd
I. INCREASE RESEARCH FUNDING	I	( )	( )	( )
Federal and state governments should increase amount of funding available for research on screening and research procedures.				
J. LICENSURE LAWS	J	( )	( )	( )
Enact strict licensure laws.				

Ballot: Issue HEC IV-5

	Recommendation	Priority Vote 1st	2nd	3rd

HEC IV-5 HEALTH CONCERNS–PREVENTION

How can more emphasis be given in the nation's medical and other professional schools to the teaching of courses on prevention along with the more traditional courses on diagnosis and treatment?

A. PREVENTION, EARLY DIAGNOSIS AND TREATMENT

A ( ) ( ) ( )

Greater emphasis should be placed in medical school education on prevention, early diagnosis and treatment as primary areas of intervention.

B. PERSONNEL/SCHOOL/RESEARCH SUPPORT

B ( ) ( ) ( )

Funding for various activities related to prevention, including scholarship and residency support, improvement of departments of community and preventive medicine, and expansion of prevention-related research, should be increased.

C. CONTINUING EDUCATION

C ( ) ( ) ( )

Continuing education for professionals in the area of prevention should be required.

D. TRAINING OF MENTAL HEALTH PROFESSIONALS

D ( ) ( ) ( )

Perception of real life situations should be emphasized in the training of mental health professionals.

E. FIRST AID TRAINING

E ( ) ( ) ( )

Training of first aid personnel in the handling of spinal cord injured should be mandated.

F. LICENSING PARAMEDICS

F ( ) ( ) ( )

Training standards and licensure for paramedical personnel should be established. The number of certified paramedical personnel should be increased.

G. PREVENTION EMPHASIS IN PROFESSIONAL SCHOOLS

G ( ) ( ) ( )

The emphasis on prevention in professional schools could be increased by (a) putting more stress on prevention in institutional and national policy, (b) giving more attention to prevention in professional curricula and (c) improving faculty and student attitudes toward preventive services.

H. HUMANISTIC, EMPATHY TRAINING

H ( ) ( ) ( )

Government funders of medical and other professional schools should be influenced to support humanistic, empathy training.

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	Ballot: Issue HEC IV-5			
	Recommendation	Priority Vote 1st	2nd	3rd
I. ACCREDITATION Groups responsible for the accreditation of professional schools should be influenced to emphasize prevention training.	I	( )	( )	( )
J. INSURANCE COVERAGE Coverage of preventive care by insurance plans should be increased.	J	( )	( )	( )
K. CHRONIC DISEASES/HANDICAPPING CONDITIONS Chronic diseases and handicapping conditions should be emphasized in the education of social workers, teachers and counselors.	K	( )	( )	( )

HEC IV-7 HEALTH CONCERNS–PREVENTION

What studies and pilot programs are needed to make the public aware of home and occupational safety and health, transportation and environmental hazards; alcohol, drug abuse, and control of toxic substances; effects of faulty nutrition; carelessness in work habits; personal behavior alterations, etc. which will tend to reduce the incidence of disabilities?

	Ballot: Issue HEC IV-7			
	Recommendation	Priority Vote 1st	2nd	3rd
A. PUBLIC AWARENESS PROGRAMS	A	( )	( )	( )
Public awareness should be increased through an ongoing mass media campaign, including TV/radio documentaries and statistics on potential hazards and causes of handicaps.				
B. PUBLIC SCHOOL EDUCATION PROGRAMS	B	( )	( )	( )
Public school education programs should be developed in response to these issues.				
C. HEW CAMPAIGN	C	( )	( )	( )
HEW should conduct a national public awareness campaign modeled on the World Health Organization's program in underdeveloped countries.				
D. SMOKING	D	( )	( )	( )
A public campaign should be conducted to discourage smoking.				
E. DRIVER LICENSING	E	( )	( )	( )
A more effective means to screen out "high-risk disability producers" in the licensing of drivers should be developed.				
F. TRAFFIC/DRUG ABUSE	F	( )	( )	( )
Both traffic and drug abuse laws should be strongly enforced.				
G. INDUSTRIAL SAFETY PRACTICES	G	( )	( )	( )
Effective industrial safety practices should be encouraged.				
H. DRUG TESTING	H	( )	( )	( )
More adequate drug testing under FDA direction should be supported.				

	Ballot: Issue HEC IV-7			
	Recommendation	Priority Vote 1st	2nd	3rd
I. INFORMATION PROGRAM Provide information program to increase public's understanding of best way to handle persons injured in accidents.	I	( )	( )	( )
J. INFORMATION CENTER Establish resource center for information on all handicapping conditions.	J	( )	( )	( )
K. HANDICAPPED PARTICIPATION Handicapped groups to prepare films, slides, etc.	K	( )	( )	( )
L. MASS MEDIA Conduct mass media campaigns.	L	( )	( )	( )

Ballot: Issue HEC IV-9

Recommendation	Priority Vote 1st	2nd	3rd

HEC IV-9 HEALTH CONCERNS–PREVENTION

What research efforts are needed in the field of prevention to increase our understanding of the causative influences of various hazards and their combined effects in for example, cross hazard impact studies such as asbestos and smoking, long-term exposure studies, specific etiologies of disabilities and disabling diseases, preventive methodologies and strategies?

A. PREVENTION RESEARCH CAREERS

Financial support should be provided to students electing to pursue careers in prevention research.

A ( ) ( ) ( )

B. INFANT TESTING

Better prenatal and infant testing methods should be developed.

B ( ) ( ) ( )

C. STUDY ON ENVIRONMENTAL HAZARDS

Federal funds should be provided for a university-based, collaborative research study on environmental hazards; results should be publicized by a federally-funded public awareness campaign.

C ( ) ( ) ( )

D. RESEARCH PRIORITIES

Research priorities should be based on the prevalence and severity of the disease/handicap.

D ( ) ( ) ( )

E. NATIONAL INSTITUTE FOR HANDICAPPING CONDITIONS

A National Institute for Handicapping Conditions should be established to coordinate research and increase funding; HEW or FICA funds should be appropriated for the development, staffing and maintenance of the NIHC.

E ( ) ( ) ( )

F. MULTIPHASIC SCREENING

Multiphasic screening facilities should be established for high risk and institutionalized populations.

F ( ) ( ) ( )

G. NATIONAL DEFENSE BUDGET DIVERSION

A percentage of the national defense budget should be diverted to public and private research in the prevention of handicapping conditions.

G ( ) ( ) ( )

H. CHILDREN WITH CONGENITAL DISORDERS

A central registry of children with congenital disorders should be developed, and follow-up methods for assistance to families should be organized.

H ( ) ( ) ( )

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Ballot: Issue HEC IV-9

Recommendation	Priority Vote 1st	2nd	3rd
I	( )	( )	( )
J	( )	( )	( )

I. RESEARCH FUNDING

Apply for federal funds for research programs.

J. PREMATURITY–LOW BIRTH WEIGHT

Federal funding for long range collaborative studies on prematurity and low birth weight (major causes of mental retardation) now in progress should be continued. Funds could go to medical centers, treatment centers and hospitals which have demonstrated particular expertise and interest in evaluating such factors as maternal alcoholism, smoking, maternal malnutrition, teenage mothers, etc.

Ballot: Issue HEC IV-10

Recommendation	Priority Vote 1st	2nd	3rd

HEC IV-10 HEALTH CONCERNS—PREVENTION

How can a public awareness program help to increase our understanding of the benefits of education, emergency medical services, shock trauma facilities, and prompt evacuation of injured persons from the scene of highway accidents to insure that injuries will not become disabling to the individual?

A. EMERGENCY/LIFESAVING SKILLS

A ( ) ( ) ( )

Public education programs should be developed to teach procedures for effective use of existing emergency systems and increase the public's skills in lifesaving techniques.

B. MENTAL HEALTH/DISEASE

B ( ) ( ) ( )

Public education programs should be developed to increase awareness of the nature of mental health/disease.

C. HEALTH ORIENTATION COURSES

C ( ) ( ) ( )

Preventive health orientation and courses in first aid in public and private schools.

D. PUBLIC AWARENESS CAMPAIGNS

D ( ) ( ) ( )

Establish State Coordinating Office for Handicapped for public awareness campaigns.

E. FIRST AID EDUCATION

E ( ) ( ) ( )

Provide preventive health education orientation and courses in first aid in public and private schools.

Ballot: Issue SOC II-1

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-1 SOCIAL CONCERNS–PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

How can adequate counseling and other psychological services best be made available on a continuing basis to handicapped persons and their families?

A. COMPREHENSIVE/COORDINATED SERVICES SYSTEMS

A ( ) ( ) ( )

A system of comprehensive, coordinated, continuous psychological, counseling and other support services should be available in all states and territories with federal, state, local and private financing to handicapped individuals and their families. Such services should include peer, group, individual and family counseling; home, residential and respite care; a services coordinator; a toll-free information number; crisis services, follow-up, and centralized resource referral; and other services located in community settings such as schools, hospitals, vocational rehabilitation centers, religious institutions, and mental health and social service agencies.

B. TRAINING PROFESSIONALS/PARAPROFESSIONALS

B ( ) ( ) ( )

Public and private resources and efforts should combine to establish a coordinated system of pre-professional, in-service training and continuing education for professionals and paraprofessionals to increase their skill, knowledge and sensitivity to problems and strengths of handicapped individuals and their families. Special attention should be given to increasing the number of counselors available to work with disability groups such as the hearing, sight and language impaired.

C. EXTEND LEGISLATION

C ( ) ( ) ( )

Congress should extend P.L. 94-142 (Education for All Handicapped Act) to cover the delivery of psychological and counseling services. Congress and HEW should extend and expand vocational rehabilitation legislation to all states and territories to encourage a focus on individual needs other than vocational; and, for counseling purposes, extend the present 12 month case closing to 24 months.

D. LICENSING/CERTIFICATION STANDARDS

D ( ) ( ) ( )

State standards for licensing and certification of professionals and paraprofessionals should require that individuals have knowledge of the handicapped and engage in continuing education activities. Federal guidelines for program certification should require a peer review process.

E. CLEARINGHOUSES

E ( ) ( ) ( )

States should establish and maintain centralized and coordinated information and referral systems at state, regional and local levels that list all relevant information about services availability and counselors. Such information should be disseminated without cost to those listed or others in need of information.

Ballot: Issue SOC II-1

	Recommendation	Priority Vote 1st	2nd	3rd
F. HANDICAPPED COUNSELORS	F	( )	( )	( )
State and private universities should recruit handicapped individuals to become counselors.				
G. EARLY DETECTION/COUNSELING REFERRAL	G	( )	( )	( )
Federal, state, local and private actions are needed to focus medical and education systems on early detection and prevention of handicaps, and to refer families of handicapped persons to counseling services.				
H. HOSPITAL SERVICES	H	( )	( )	( )
Hospitals should create positions/offices to coordinate counseling and psychological services and to insure appropriate referrals and services.				
I. SMALL/RURAL COMMUNITIES	I	( )	( )	( )
States should provide counseling and psychological services to handicapped persons and their families residing in small and rural communities by using means such as mobile units or home visitors.				
J. PEER COUNSELING	J	( )	( )	( )
Public and private funds should be used for peer counseling and the exchange of information between and support for centers, clubs, and handicapped and parent groups.				
K. PUBLIC EDUCATION/AWARENESS	K	( )	( )	( )
Public and private efforts should be mobilized to develop public education and information programs to promote realistic positive images of handicapped individuals, to improve public understanding and awareness, and to provide specialized information to lay and professional groups regarding specific disability groups. Hospitals and libraries should be encouraged to stock both general and specialized written and audiovisual materials.				
L. COUNTY COORDINATING OFFICES	L	( )	( )	( )
Counties should establish coordinating offices to insure that psychological and counseling services are provided in their areas.				
M. VOLUNTEERS	M	( )	( )	( )
Local agencies and advocacy organizations should identify, recruit, and train competent volunteers to work with handicapped individuals and their families.				

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Ballot: Issue SOC II-1

	Recommendation	Priority Vote 1st	2nd	3rd
N. HANDICAPPED REGISTRATION	N	( )	( )	( )
Federal, state and local laws should require physicians to register handicapped patients to facilitate treatment and follow-up.				
O. THIRD PARTY PAYMENTS FOR PSYCHOLOGISTS	O	( )	( )	( )
Congress should certify psychologists as being independent health service providers who should be permitted to receive third party payments from government and insurance programs. If necessary, federal and state insurance programs should be established for counseling services.				
P. TEACHER ORGANIZATIONS LOBBYING	P	( )	( )	( )
Federal and state teachers' organizations should lobby for additional counseling and psychological services for handicapped individuals and their families.				
Q. DECENTRALIZED FACILITIES	Q	( )	( )	( )
Public school and training facilities for the handicapped should be decentralized to allow handicapped individuals to be closer to their families.				
R. STATE ADVISORY COUNCILS	R	( )	( )	( )
State advisory councils with paid staffs should be established to coordinate community programs and resources for counseling and psychological services.				
S. TRANSPORTATION/ACCESSIBLE FACILITIES	S	( )	( )	( )
Health and counseling facilities should be architecturally accessible and transportation should be provided if necessary.				
T. COUNSELING/PSYCHOLOGICAL CENTERS	T	( )	( )	( )
Federally funded counseling and psychological centers should provide immediate aid to handicapped people and their families. These centers should be responsive to changing client needs and to new treatment techniques, services and benefits, with special arrangements made for the hearing impaired.				
U. ASSERTIVENESS TRAINING	U	( )	( )	( )
Assertiveness training should be available to handicapped individuals to aid them in requesting needed services.				

Ballot: Issue SOC II-1

	Recommendation	Priority Vote 1st	2nd	3rd
V. SERVICE AGENCY STYLES	V	( )	( )	( )
Federal and state efforts should make service delivery more personal and less bureaucratic, and allow more time for service delivery and less for paperwork.				
W. COUNSELING AFTER TRAUMATIC INJURIES	W	( )	( )	( )
Counseling services to families should be available immediately after traumatic injuries to minimize adjustment problems.				
X. MANDATE HANDICAPPED CASELOAD	X	( )	( )	( )
Federal and state legislation should mandate that direct service agencies receiving federal and state funds should have at least 10% handicapped persons in their caseloads.				
Y. COUNSELING/PSYCHOLOGICAL SERVICES	Y	( )	( )	( )
Federal legislation and guidelines should require that federally-supported health care institutions provide individual and family counseling and psychological services by qualified staff; and maintain a directory of local services. Agencies should further be required to notify other agencies about the diagnoses of handicapped individuals.				
Z. NATIONAL RIGHT TO SERVICES LAW	Z	( )	( )	( )
Congress should enact a National Right to Services law covering medical, psychological and vocational training as well as legal, education and social services.				
AA. STUDENT INTERN PROGRAMS	AA	( )	( )	( )
Student intern counseling programs should be organized to insure continuity of services.				
BB. LOCAL CENTERS	BB	( )	( )	( )
Local non-profit centers should be established to provide counseling and psychological services.				
CC. INSURANCE	CC	( )	( )	( )
Federal and state governments should establish insurance for handicapped individuals and their families for counseling services.				
DD. RESEARCH EXPERTS	DD	( )	( )	( )
Federal and state funds should support consulting by research experts for professional counselors.				

Ballot: Issue SOC II-1

	Recommendation	Priority Vote 1st	2nd	3rd
EE. PSYCHOLOGICAL ABUSE A toll-free number should be available for reporting cases of psychological abuse of handicapped children.	EE	( )	( )	( )
FF. TAX DEDUCTIONS To permit greater access to counseling and psychological services, Congress should ease the tax laws to permit the handicapped to increase allowable deductible health/mental health services or to increase tax deductions for the handicapped and/or their families.	FF	( )	( )	( )
GG. INSURANCE COVERAGE Private insurance companies should review their coverage for chronically ill patients and for counseling and psychological services.	GG	( )	( )	( )
HH. STAFF COMPENSATION States should insure that personnel in human service settings have adequate compensation to encourage quality services.	HH	( )	( )	( )
II. SUBSIDIZE NEWSLETTER The federal government should subsidize a newsletter for disabled and non-disabled persons that will facilitate communications among concerned persons.	II	( )	( )	( )
JJ. PSYCHOLOGICAL SERVICES SUBSIDIES Public subsidies should be provided to handicapped individuals to allow them to purchase psychological services.	JJ	( )	( )	( )
KK. TRAINING IN FAMILY MANAGEMENT State and local governments should establish interdisciplinary, comprehensive training programs in family management for parents and relatives of handicapped individuals. Handicapped individuals should be involved in instruction.	KK	( )	( )	( )
LL. CLINIC RESOURCES Existing clinics should expand their resources for psychological services to serve those in need of service more quickly.	LL	( )	( )	( )
MM. PSYCHOLOGICAL EVALUATION BEFORE THERAPY Psychological evaluations should be done before therapy is recommended for a handicapped person.	MM	( )	( )	( )

Ballot: Issue SOC II-3

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-3 SOCIAL CONCERNS–PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

What psychological and social services are necessary to effect adequate transitions of handicapped individuals from an institution to a community?

A. TRANSITIONAL PROGRAMS

A ( ) ( ) ( )

Federal, state, local and private resources should develop transitional programs including the following components: staff attitude training, sensitizing the general public, increasing normalization of institutions, shortening and/or preventing institutionalization, establishing architecturally accessible community living alternatives, and supportive services with counseling through peers and professionals to individuals and their families. Information, referral, and outreach services should be available throughout the states.

B. COMMUNITY AWARENESS/SENSITIZATION

B ( ) ( ) ( )

Public and private efforts should be made to encourage media sources, authors and publishing companies to realistically portray handicapped people in various roles and settings to aid in public awareness and sensitization. Special efforts should be made to reach community sectors that directly impact handicapped individuals.

C. CREDENTIALING REQUIREMENTS

C ( ) ( ) ( )

Federal, state and local credentialing authorities should require institutions and rehabilitation programs to provide services including academic, social, independent living skills and self-care training, and after-care and follow-up.

D. INDEPENDENT LIVING PREPARATION

D ( ) ( ) ( )

Institutions should prepare individuals for community life before they are discharged.

E. EMPLOYMENT/TRAINING

E ( ) ( ) ( )

Federal, state, local and private efforts should develop employment opportunities and enforce affirmative action laws for handicapped individuals. Meaningful training for employment should be provided both in institutions and community settings.

F. FOLLOW-UP COORDINATORS

F ( ) ( ) ( )

Federal and state funds should support "follow-up" coordinator positions in service agencies. Coordinators would supply services both before and after release from the institution to insure continuity of services and provide support.

	Ballot: Issue SOC II-3			
	Recommendation	Priority Vote 1st	2nd	3rd
G. MAINSTREAMING INSTITUTIONALIZED	G	( )	( )	( )
Institutions should make every effort to mainstream residents into regular community schools, programs and activities.				
H. SERVICES EVALUATION	H	( )	( )	( )
Implementation of a comprehensive system for evaluating services should be carried out.				
I. ADVOCACY	I	( )	( )	( )
Interested citizen volunteers should assist handicapped people, fully or partially unable to represent themselves, to represent their interests.				
J. CONSUMER PARTICIPATION	J	( )	( )	( )
Service agencies boards should include consumer representatives who should also be involved in monitoring and evaluating service quality.				
K. ADJUSTMENT FUNDS	K	( )	( )	( )
States should provide short-term financial assistance to individuals during the period in which they adjust to community living.				
L. VOLUNTEERS	L	( )	( )	( )
Community agencies and organizations should recruit handicapped and non-handicapped volunteers to assist handicapped persons during the transition process to make social contacts, become involved in community activities, and cope with problems and feelings.				
M. REDEFINE RSA ROLE	M	( )	( )	( )
Congress and HEW should expand and redefine the role of the Rehabilitation Services Administration in relation to normalization and integration.				
N. HOME CARE TAX RELIEF	N	( )	( )	( )
Federal and state income taxes should allow continued deductions for home care attendants and equipment.				
O. REHABILITATION SERVICES	O	( )	( )	( )
Rehabilitation programs should provide a coordinated system of services in housing, recreation and employment.				

Ballot: Issue SOC II-3

	Recommendation	Priority Vote 1st	2nd	3rd
P. DEINSTITUTIONALIZATION MANDATES	P	( )	( )	( )
Mental health/mental retardation and other agencies are not carrying out deinstitutionalization mandates. Government agencies should withhold funds until directives are followed. Handicapped individuals and group representatives should attend Advisory Board meetings of service agencies to insure action.				
Q. INTERDISCIPLINARY TEAMS	Q	( )	( )	( )
State and local service agencies should create interdisciplinary teams, including doctors, psychologists, and social workers, to provide transition services and support to deinstitutionalized persons and to insure community involvement and integration.				
R. INCREASE PUBLIC FUNDS	R	( )	( )	( )
Federal and state funds should be increased for both institutions and individuals.				
S. EXPAND SSI/HOME CARE	S	( )	( )	( )
Congress should provide Supplemental Security Income funding for families who want to provide long term care for handicapped persons at home.				
T. LEGAL AID	T	( )	( )	( )
The Comprehensive Education and Training Act and other community funding should support staff for legal aid offices for the handicapped in all states. To the extent possible, handicapped people should be employed to represent handicapped clients and to disseminate information.				
U. STATE CIVIL RIGHTS OFFICES	U	( )	( )	( )
States should establish civil rights offices to monitor all state activities and legislation relating to the handicapped.				

Ballot: Issue SOC II-4

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-4 SOCIAL CONCERNS PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

What additions or modifications in professional training programs will lead to improved quality and availability of psychological services for handicapped persons?

A. PRE-PROFESSIONAL TRAINING

A ( ) ( ) ( )

Education institutions for training human service providers should include practical experience and course work in disabilities and psychological support techniques, sexual and emotional needs and capacities, special communication needs and community resources.

B. IN-SERVICE TRAINING

B ( ) ( ) ( )

Public and private resources should insure that in-service training programs relating to the needs of the disabled and their families are provided for all relevant personnel including teachers, health and mental health providers, and regulatory agency staffs.

C. PROFESSIONAL/PARAPROFESSIONAL TRAINING

C ( ) ( ) ( )

Governments at all levels should increase funds for professional and paraprofessional training. Federal funds for graduate programs in clinical psychology should be reestablished to their former level.

D. COUNSELOR TRAINING

D ( ) ( ) ( )

Counselors should be well trained to accurately assess a client's interests.

E. TRAINING HANDICAPPED COUNSELORS

E ( ) ( ) ( )

Professional training institutions should recruit and train more handicapped persons as counselors and rehabilitation service providers.

F. CERTIFICATION/LICENSING

F ( ) ( ) ( )

A federal agency should coordinate and oversee human service professional certification and licensing programs as well as education programs and should mandate professional organizations to establish uniform standards for professionals. All professional qualifying examinations should include questions relating to handicapped persons.

G. TEAM TRAINING

G ( ) ( ) ( )

Training programs should be designed to encourage interagency teamwork and to encourage pooling of public and private agency resources.

Ballot: Issue SOC II-4

	Recommendation	Priority Vote 1st	2nd	3rd
H. HANDICAPPED/FAMILY AS INSTRUCTORS	H	( )	( )	( )
Handicapped persons and family members should be encouraged to serve as instructors in professional education programs to promote and present their needs.				
I. TRAINING MATERIALS	I	( )	( )	( )
Federal, state, local and private resources should develop specialized and general public information materials relating to human potential, normalization concepts and advantages of community-based residences for use in in-service, pre-service and public education programs.				
J. PROFESSIONAL ORGANIZATIONS ROLE	J	( )	( )	( )
National, state and local professional organizations should be contacted for comments on implementation plans.				
K. TRAINING INCENTIVES	K	( )	( )	( )
Federal training incentive programs, such as preceptorships and fellowships, should be expanded to encourage professionals to work with the handicapped. Students receiving assistance should be required to give a number of years of service to the handicapped.				
L. CONSUMER PARTICIPATION	L	( )	( )	( )
Federal and state grant review committees should include handicapped persons.				
M. STATE CERTIFICATION	M	( )	( )	( )
State legislatures should mandate that state certification requirements for psychiatrists and psychologists include psychological adjustment of the handicapped.				
N. BRAILLE/SIGN LANGUAGE	N	( )	( )	( )
Higher education institutions and high schools should offer braille and sign language methods as credit course alternatives to foreign languages.				
O. NEEDS/FACILITIES	O	( )	( )	( )
Professional education programs should require students to survey the needs of individuals and to visit existing facilities and prepare reports on their findings to improve their first-hand knowledge.				

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	Ballot: Issue SOC II-4			
	Recommendation	Priority Vote 1st	2nd	3rd
P. DISABILITY SIMULATIONS	P	( )	( )	( )
States should mandate that disability simulation be a part of training for rehabilitation service providers.				
Q. PEER COUNSELING	Q	( )	( )	( )
Counselors should be trained to involve handicapped individuals and family members in providing support and mutual assistance.				

Ballot: Issue SOC II-6

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-6 SOCIAL CONCERNS—PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

How can handicapped individuals and their families be encouraged to help other handicapped persons and their families with adjustment problems?

A. INFORMATION EXCHANGE/REFERRAL

A ( ) ( ) ( )

State, regional and local governments should appoint handicapped and non-handicapped coordinators to monitor programs and volunteer resources, and offer referral information to assist in organizing and publicizing support groups, develop training, and initiate community awareness programs.

B. OUTREACH PROGRAMS

B ( ) ( ) ( )

State and local mental health, rehabilitation, health and other agencies should develop outreach programs to encourage self-help and mutual assistance.

C. TRAINING HANDICAPPED AS PARAPROFESSIONALS

C ( ) ( ) ( )

Federal, state, local and private resources should develop, establish and support a core of trained paraprofessional handicapped individuals to facilitate mutual support and assistance. Special consideration should be given to training hearing-impaired individuals to work with other hearing-impaired persons.

D. TOLL-FREE PHONES

D ( ) ( ) ( )

Federal and state funds should support toll-free telephone numbers to provide information.

E. INFORMATION JOURNAL

E ( ) ( ) ( )

Federal funds should support the establishment of a journal to promote information exchange between handicapped individuals and organizations.

F. ASSERTIVENESS TRAINING

F ( ) ( ) ( )

Advocacy organizations should provide assertiveness training to assist handicapped individuals to more effectively express their needs individually and as a group.

G. CENTRAL REGISTRY

G ( ) ( ) ( )

A central referral list of handicapped individuals should be maintained to facilitate referral and mutual assistance efforts.

Ballot: Issue SOC II-6

Recommendation	Priority Vote 1st	2nd	3rd
H	( )	( )	( )

H. ALLIANCES WITH OTHER GROUPS

Organizations and groups of handicapped persons should ally with other support groups such as Alcohol Anonymous.

Ballot: Issue SOC II-2

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-2 SOCIAL CONCERNS—PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

What actions should be taken to avoid any dehumanizing aspects of institutionalization?

A. COMMUNITY ALTERNATIVES

A ( ) ( ) ( )

Federal, state, local and private efforts are needed to develop barrier-free community alternatives that maximize individual independence and expand opportunities for handicapped people to reside in "least restrictive environments." Only after other alternatives are fully explored should a person be institutionalized.

B. STAFF TRAINING

B ( ) ( ) ( )

Federal, state and local funds should support in-service and continuing education programs (especially sign language) for employees of institutions to promote empathy and positive behavior and attitudes.

C. LICENSING/ACCREDITATION FACILITIES

C ( ) ( ) ( )

State mechanisms should be established to facilitate and monitor the review of facilities for licensing and re-licensing on an unannounced and periodic basis. Accreditation standards should be enforced and violations should result in a withdrawal of public funding.

D. FAMILY ROLE

D ( ) ( ) ( )

Public funds should support efforts to enhance the role of the family in the life of institutionalized persons by placing handicapped persons in facilities as close as possible to their families, by providing housing and/or transportation for family visits to the institution and resident visits away from the institution, and by providing family training in the care of handicapped relatives.

E. HOMELIKE QUALITIES

E ( ) ( ) ( )

All institutions should be made more homelike, and privacy and a sense of identity should be provided along with opportunities for contacts with members of the opposite sex.

F. CONSUMER PARTICIPATION

F ( ) ( ) ( )

Governing boards of institutions should be comprised of 50% handicapped individuals and/or their families.

G. MONITOR WELL-BEING/STATUS OF INSTITUTIONALIZED INDIVIDUALS

G ( ) ( ) ( )

Periodic follow-up of institutionalized persons should monitor service delivery, need for continuing institutionalization, and reassess realistic goals. Time-limited admissions would insure this process.

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Ballot: Issue SOC II-2

	Recommendation	Priority Vote 1st	2nd	3rd
H. RESPECT FOR INDIVIDUALS	H	( )	( )	( )
Respect should always be shown for institutionalized persons who should be addressed by Mrs., Mr., Miss, or Ms.; should not be referred to by handicapping condition; should not be housed in buildings and rooms with stigmatizing labels; should be provided with clothes and hair styles in current fashion; and should be accorded as much privacy as possible. Mail should be delivered unopened.				
I. FACILITIES CONSTRUCTION/MODERNIZATION	I	( )	( )	( )
Federal, state and local funds should support the development of new facilities and modernization of existing facilities to provide smaller, more home-like, and private spaces.				
J. OPPORTUNITIES TO BE USEFUL	J	( )	( )	( )
A consortium of federal, state and local public and private organizations should develop a plan to provide roles for patients, including working agreements with the institutions and volunteer assistance with patients and in programs.				
K. SIGHT, HEARING AND LANGUAGE IMPAIRED	K	( )	( )	( )
Institutions should insure that sight, hearing, and language impaired residents have access to professional interpreters at all times; visual warning signals are readily available and apparent; and readers are available.				
L. FACILITIES DESIGN	L	( )	( )	( )
Handicapped persons should be involved in designing new institutional facilities and in modernization plans for existing structures to insure that special needs are considered.				
M. TESTING/TRAINING HANDICAPPED	M	( )	( )	( )
States should provide funds for aptitude testing and training of handicapped institutional residents.				
N. PATIENT RIGHTS	N	( )	( )	( )
Institutions should provide residents and their families with a "Patients' Bill of Rights". Administrative codes should mandate immediate dismissal of employees who abuse patient rights. An ombudsman or a patient/advocacy program should be established.				
O. DECENTRALIZED SERVICES DELIVERY	O	( )	( )	( )
Service delivery system should be decentralized to provide more individualized services.				

Ballot: Issue SOC II-2

	Recommendation	Priority Vote 1st	2nd	3rd
P. RESIDENCE VACANCIES	P	( )	( )	( )
Regional and state programs should be developed to maintain computerized information banks on vacancies in community-based residences and programs.				
Q. FAMILY RESOURCE SERVICE PROGRAMS	Q	( )	( )	( )
Public and private resources should support the development of Family Resources Service Programs that include services for temporary residential care, homemaker services, live-in companions, and family training to enable more people to remain with their families.				
R. HANDICAPPED VOLUNTEER COUNSELORS	R	( )	( )	( )
Handicapped individuals should be encouraged to train in counseling techniques and to act as volunteer counselors.				
S. HANDICAPPED EMPLOYEES	S	( )	( )	( )
Fifty percent of the employees of institutions should be handicapped to contribute productively to the functioning of their residences.				
T. HUMANIZE INSTITUTIONS	T	( )	( )	( )
Handicapped individuals should take the lead to assist in humanizing institutions.				
U. LIAISON SOCIAL WORKERS	U	( )	( )	( )
State and local service systems should establish liaison social workers who maintain contact between institution and home.				
V. EVALUATION SYSTEMS	V	( )	( )	( )
Evaluation systems such as the Program Analysis of Service System (PASS) should be used when evaluating institutions to determine the extent to which a service inappropriately isolates handicapped people from community interaction.				
W. PUBLIC EDUCATION	W	( )	( )	( )
Public education programs should examine the dehumanizing aspects of institutionalization.				
X. PSEUDO-FAMILY GROUPINGS	X	( )	( )	( )
Institutions should experiment with developing pseudo-family or family-like groupings.				

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	Ballot: Issue SOC II-2			
	Recommendation	Priority Vote 1st	2nd	3rd
Y. EDUCATION MAINSTREAMING	Y	( )	( )	( )
Institutionalized children should be mainstreamed into the public education system.				
Z. HUMAN/CIVIL RIGHTS LAWS	Z	( )	( )	( )
State should pass and enforce legislation guaranteeing the rights of persons receiving services from state agencies. Rights Committees should be created and located strategically throughout states.				

Ballot: Issue SOC II-7

Recommendation	Priority Vote 1st	2nd	3rd

SOC II-7 SOCIAL CONCERNS–PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

What is necessary for handicapped and non-handicapped individuals to perceive disabled persons as sexual beings?

A. SEX EDUCATION INFORMATION/COUNSELING

A ( ) ( ) ( )

Sex education information and counseling should be available for handicapped individuals of all ages and their families through public and private schools, hospitals, and vocational rehabilitation and other agencies.

B. MAINSTREAM HANDICAPPED

B ( ) ( ) ( )

Handicapped individuals should be encouraged to participate in education, recreation, and social and other activities with non-handicapped people.

C. PUBLIC AWARENESS/EDUCATION

C ( ) ( ) ( )

Public awareness and education efforts that portray handicapped individuals in a variety of roles and social situations, by the media and in books and texts, should be encouraged by public and private actions and funds.

D. TRAINING PROGRAMS

D ( ) ( ) ( )

State and local sponsored training programs and workshops dealing with specific and general information about sexuality for handicapped should be available for consumers and their families. Service providers should receive specific pre- and in-service training relating to specific handicapping conditions and problems of sexual habilitation.

E. PEER COUNSELING

E ( ) ( ) ( )

Individual and group peer counseling resources should be available locally to assist persons with sexual problems and concerns.

F. RESEARCH ON SEX ADJUSTMENT COUNSELING

F ( ) ( ) ( )

HEW should support a major research effort on sex adjustment counseling.

G. FAMILY PLANNING COUNSELING

G ( ) ( ) ( )

State and local family planning agencies should provide counseling to handicapped individuals.

Ballot: Issue SOC II-7

Recommendation	Priority Vote 1st	2nd	3rd
H. COUNSELING FEES Counseling should be immediately available as needed on a sliding scale basis, or free if a handicapped person is unable to pay the minimum fee.	H ( )	( )	( )
I. INDEPENDENT LIVING RESIDENCES Federal, state and private funds should establish independent living residences, with attendant help as needed, to promote good mental health.	I ( )	( )	( )
J. COUNTY COUNSELING SERVICES County coordinating offices should be established to deliver and coordinate a full range of services, including psychological and sexual counseling.	J ( )	( )	( )
K. SEX EDUCATION COURSES Rehabilitation services administrations should provide grants to colleges and universities engaged in training rehabilitation specialists to develop courses in sex education.	K ( )	( )	( )
L. NIMH TRAINING SUPPORT The National Institute of Mental Health should fund in-service training for mental health center counselors in sexual counseling for the handicapped.	L ( )	( )	( )

Ballot: Issue SOC II-8

	Recommendation	Priority Vote 1st	2nd	3rd
SOC II-8 SOCIAL CONCERNS–PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES				
What are the most important research needs in the area of psychological adjustment of disabled individuals and their families?				
A. NEEDS/ADJUSTMENT/SELF-IMAGE	A	( )	( )	( )
Federal, state and local research efforts should focus on in-depth assessment and analysis of needs, psychosocial adjustment, family dynamics, and self-realization of handicapped individuals and their families.				
B. TRAINING MATERIALS	B	( )	( )	( )
Federal, state and local funds should support the development of simple, practical materials describing constructive programs, therapy and survival techniques for dissemination to service providers and consumers.				
C. RESEARCH FELLOWSHIPS	C	( )	( )	( )
Federal and state funds should provide career fellowships for established behavorial science researchers.				
D. VOCATIONAL REHABILITATION RESEARCH GRANTS	D	( )	( )	( )
Congress should re-establish vocational rehabilitation doctoral and post-doctoral research grants.				
E. COUNSELING TECHNIQUES EVALUATION	E	( )	( )	( )
Research at all levels should evaluate the effectiveness of different theoretically-based counseling techniques.				
F. BARRIERS TO SERVICE UTILIZATION	F	( )	( )	( )
Social and private efforts should be made to identify barriers to utilizing community services.				
G. STATE CLEARINGHOUSES	G	( )	( )	( )
States should develop central repositories of data on handicapped persons for research and training purposes.				
H. CHILD ABUSE	H	( )	( )	( )
Research should be done to investigate the incidence of child abuse among handicapped children.				

Ballot: Issue SOC II-8			
Recommendation	Priority Vote 1st	2nd	3rd
I	( )	( )	( )

I. ADJUSTMENT TO RELOCATION

Research should be supported to determine the adjustment problems associated with relocation of severely disabled individuals; such research should be used to find ways to minimize the risk of trauma and deterioration of adaptive skills that can accompany a movement from home to alternative living arrangement, institution to community, or from one community living arrangement to another.

Ballot: Issue SOC II-5

	Recommendation	Priority Vote 1st	2nd	3rd

SOC II-5 SOCIAL CONCERNS--PSYCHOLOGICAL ADJUSTMENT OF HANDICAPPED INDIVIDUALS AND THEIR FAMILIES

How can personnel from all fields (medicine, social work, etc.) be trained to be sensitive to the psychological as well as the physical needs of handicapped persons?

A. PROFESSIONAL/PARAPROFESSIONAL TRAINING — A ( ) ( ) ( )

Federal, state, local and private financing should support and promote pre-professional, in-service and continuing education programs for students and members of all helping professions. The content of these training efforts should give attention to attitudinal awareness, sensitivity, interpersonal relations and communications.

B. HANDICAPPED ROLES — B ( ) ( ) ( )

Training institutions and service delivery agencies should hire handicapped individuals for roles in curriculum planning, instruction, service delivery and advocacy.

C. CERTIFICATION/LICENSING — C ( ) ( ) ( )

Federal guidelines and state licensing and certification laws should require pre-service, in-service and continuing education for all students and professionals in allied medical professions. Requirements should include formal course work and interaction with handicapped individuals.

D. PROFESSIONAL ORGANIZATIONS ROLE — D ( ) ( ) ( )

National professional organizations should play an active role in developing standards and criteria for accreditation and licensing of both professional education programs and individuals.

E. TRAINING/SERVICES COORDINATION — E ( ) ( ) ( )

State and local service agencies and training institutions should coordinate service delivery, in-service training and public awareness activities.

F. STATE INCENTIVES — F ( ) ( ) ( )

State personnel policies for service agencies should provide incentives for in-service training and continuing education such as tuition, time-off and mileage.

G. MULTIDISCIPLINARY TRAINING/SERVICES — G ( ) ( ) ( )

Policies at all levels should encourage multidisciplinary training and service delivery to promote sensitivity and communication between specialities.

Ballot: Issue SOC II-5

	Recommendation	Priority Vote 1st	2nd	3rd
H. PUBLIC AWARENESS	H	( )	( )	( )
Federal, state and local governments should develop effective public awareness programs to increase knowledge and awareness of both professionals and the general public.				
I. TEACHER TRAINING	I	( )	( )	( )
Federal funds should be provided to increase the number of teachers trained to provide professional level training relating to the needs of the handicapped.				
J. NEEDS/TRAINING SURVEYS	J	( )	( )	( )
Professional training curricula should include student surveys of individual needs and training in facilities offering psychological services.				
K. PUBLIC SCHOOL EDUCATION	K	( )	( )	( )
States should require and provide materials for teaching about handicapping conditions in regular public schools.				
L. HOTLINE FOR PROFESSIONALS	L	( )	( )	( )
The federal government should establish a toll-free hotline for professionals needing specialized information.				
M. HANSEN'S DISEASE	M	( )	( )	( )
Federal funds should support a program to train medical and social service providers to diagnose, treat and follow-up persons with Hansen's Disease.				
N. FAMILY CENTERED MODEL: TRAINING/SERVICE	N	( )	( )	( )
Service providing professions should be organized on family centered models that meet the needs of the total family, education of professionals in family dynamics, advocacy for family needs, direct counseling and therapy, and supportive services.				
O. PRACTICUM OPPORTUNITIES	O	( )	( )	( )
A centralized register of handicapped individuals and families in need of services should be distributed to high school and university programs in order to promote practicum opportunities for students interested in helping professions.				
P. PUBLIC AWARENESS DAY	P	( )	( )	( )
Federal funds should support a Public Awareness Day to be coordinated and followed-up by states.				

Ballot: Issue SOC II-5

	Recommendation	Priority Vote 1st	2nd	3rd
Q. COMMUNITY EDUCATION CENTERS	Q	( )	( )	( )
State education agencies should create community education centers to encourage students to work with handicapped persons during vocational and college preparation.				
R. HANDICAPPED COURSES	R	( )	( )	( )
State supported universities should offer courses on the handicapped.				
S. EXCHANGE PROGRAMS	S	( )	( )	( )
Exchange programs should be developed between service agencies and professional education institutions to enable periodic information exchange between rehabilitation personnel and educators.				
T. AWARENESS/SENSITIVITY TRAINING	T	( )	( )	( )
Federal and state funds for education should be withheld until all levels of education from kindergarten through professional education have developed course work in awareness/sensitivity training.				

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